

Electronic Filing System (EFS) Data

Electronic Patent Application Submission

USPTO Use Only

EFS ID: 53708
Application ID: 10707818 

Title of Invention: Articulated Neural Electrode Assembly

First Named Inventor: Corrinne Stern

Domestic/Foreign Application: Domestic Application

Filing Date: 2004-01-14

Effective Receipt Date: 2004-01-14

Submission Type: Utility Patent Filing

Filing Type: new-utility

Confirmation number: 1817

Attorney Docket Number: 2003.15

Total Fees Authorized: 425.0

Payment Category: Deposit Account

Deposit Account Number: 37905

Deposit Account Name: Leif R. Sloan

Access Code: ****

RAM Payment Status: RAM has been failed because:
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Digital Certificate Holder: cn=Sonya Corlette Harris,ou=Registered Attorneys,ou=Patent and Trademark Office,ou=Department of Commerce,o=U.S. Government,c=US
Certificate Message Digest: 3afe6d53d640d1ab555815889f8d81b0f3724751

FEE TRANSMITTAL

Electronic Version v08
Stylesheet Version v08.0

Title of Invention	Articulated Neural Electrode Assembly																								
Application Number: Date: First Named Applicant: Corrinne Stern Attorney Docket Number: 2003.15																									
TOTAL FEE AUTHORIZED \$425																									
Patent fees are subject to annual revisions on or about October 1st of each year.																									
Filing as small entity																									
BASIC FILING FEE																									
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fee: \$385</td></tr></tbody></table>						Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	385	385	Subtotal For Basic Filing Fee: \$385											
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Subtotal For Additional Fees: \$40

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number: 037905 50-2854

Access Code ****

Deposit name: Northstar Neuroscience

Deposit authorized name: Leif R. Sloan

Signature: Leif R. Sloan

Date (YYYYMMDD): 2004-01-13

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).